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Elaine Raiten

(Depositor's name)

Elaine Raiten

(Signature)

JANUARY 3, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/777,631	02/06/2001	Douglas W. Kohrs	6683.26USC1	4464

TITLE OF INVENTION: INTERVERTEBRAL IMPLANT WITH REDUCED CONTACT AREA AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$137.00	\$300	\$1670	01/03/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
SNOW, BRUCE EDWARD	373.00	623.017160			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Faegre & Benson LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Zimmer Spine, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Minneapolis, Minnesota

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number **06-0029** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

Typed or printed name

Tong Wu

Date

January 3, 2005

Registration No.

43,361

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PTOL-85 (Rev. 09/04) Approved for use through 04/30/2007.

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01 FC:1501

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Date: January 3, 2005 Time: _____ .m. (Minneapolis)
Number of pages (including this page): 3 F&B File No.: 307895 Rec.: 993
From: Tong Wu Telephone Number: 612/766-6804
To: MAIL STOP ISSUE FEE FAX No.: (703)746-4000
U.S. Patent & Trademark Office

Inventor(s): DOUGLAS W. KOHRS
Appln. No.: 09/777,631
Filing Date: February 6, 2001
Title: INTERVERTEBRAL
IMPLANT WITH REDUCED
CONTACT AREA AND
METHOD

Examiner: [REDACTED]
Group Art Unit: 3738
Docket No. 75028-307895

Attached for filing in the above-referenced patent application:

1. Part B - Fee(s) Transmittal
2. Credit Card Authorization Form in the total amount of \$1,700 for the Issuance Fee of \$1,400 and Publication Fee of \$300.

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